

APPLICATION FOR AMPHITHEATER RESERVATION 2004

Requesting Reservation at:	York River Sta	ate Park	
Name of Party or Organization	ı:		
Desired Date of Reservation: _	Month	Day	Year
Party Size:p	eople		
Reservation Fee: <u>\$</u>			
	ed Date of Reservation:		
Reservation Fees: \$104.50 per			
Checks or money order must b	e made payable	to the Treasu	rer of Virginia.
facilities at the park. All Virgi	nia State Park re	egulations app	oly. Alcoholic beverages are
Applicant's Name:			
Address:			
Home Phone:		_ Business Pl	none:
Signature:		Date	e:
**Applications accepted first of	come, first serve	. Confirmatio	on upon receipt of payment.